

Exhibit 1.2 to Exhibit B

clmnt_idno - UAA <<SequenceNo>>

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Wells Fargo Unauthorized Account Settlement

Listed below are accounts opened by Wells Fargo in your name that may potentially be unauthorized. If you fill out the enclosed claim form, identifying the accounts you claim are unauthorized, and mail it back by **Month XX, 2017**, or submit a claim online at WFSettlement.com, you may be eligible to receive a payment from a Class Action Settlement with Wells Fargo. A postage-paid envelope is enclosed to mail the claim form.

Check all accounts opened from May 1, 2002 through April 20, 2017 that you claim are unauthorized:

- ☐ Checking Acct No. <<XXXXXXXXXX9999>> ☐ Credit Card No. <<XXXXXXXXXXXXXXXX9999>>
- ☐ Savings Acct No. <<XXXXXXXXXX9999>> ☐ Line of Credit No. <<XXXXXXXXXX9999>>
- ☐ Other checking or savings accounts, credit cards, or lines of credit (include the approximate year the account was opened): _____

Please check all that apply to you:

- ☐ I believe that I was charged fees in connection with unauthorized accounts opened in my name.
- ☐ I believe my credit was damaged in connection with one or more unauthorized credit card, line of credit, small business deposit accounts ("Unauthorized Credit Impact Account").

If so, provide:

- Approximate year(s) in which Unauthorized Credit Impact Account was opened _____; and/or
- Year(s) in which you opened a valid credit tradeline believed to be affected by Unauthorized Credit Impact Account _____.

- ☐ I believe my credit was damaged in connection with a valid credit card ("Authorized Credit Impact Account") as a result of overdraft protection provided to one or more unauthorized consumer or small business deposit accounts.

If so, provide:

- Approximate year(s) in which unauthorized consumer or small business deposit accounts with overdraft protection was opened _____; and
- Last four digits of account number of Authorized Credit Impact Account _____.

Please use the space below if you would like to provide more details on any credit-related injury:

☐ I authorize my credit report to be accessed in order to verify information provided on this claim form and determine whether unauthorized accounts damaged my credit. I agree not to sue the credit agency for providing my credit report for this purpose and waive any claim that providing it for this purpose is improper. This authorization will not affect credit.

☐ I enrolled in Wells Fargo identity theft protection. If yes, please indicate the time period in which you enrolled:

☐ From May 1, 2002 through December 31, 2008 ☐ From January 1, 2009 through April 20, 2017

Please sign this line to confirm that information provided in this form is true under penalty of perjury